


Appendix A-1

Please print a clear copy of this form and attach it to the application.	
UTILITY PATENT APPLICATION TRANSMITTAL	
Attorney Serial No.	1071227
Inventor	John A. Skala
Title	Polysaccharide Antibody Vaccine
Domestic Patent Label No.	1071227/US
APPLICATION ELEMENTS See MPEP Chapter 600 concerning utility patent application contents.	
ADDRESS TO: Commissioner for Patents Box Patent Application Washington, DC 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., FTO55/17) (submit in original and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
3. <input checked="" type="checkbox"/> Specification (Total Pages: 28) (attach separate sheets as follows):	a. <input type="checkbox"/> Computer Readable Form (CRF)
- Descriptive Title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claims - Abstract of the Disclosure	b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies), or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies
4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) (Total Sheets: 4)	ACCOMPANYING APPLICATION PARTS
5. Oath or Declaration (Total Pages: 2) a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application or (see below) (for continuation/divisional with Box 19 completed) i. <input type="checkbox"/> DELETION OF INVENTION(S) Signed statement attached deleting invention(s) named in this prior application, see 37 CFR 1.52(a)(2) and 1.53(a).	9. <input type="checkbox"/> Assignment Papers (over sheet & annexes) 10. <input type="checkbox"/> 37 CFR 1.78(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignment) 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure Statement (IDS/PTO-1449) <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 600) (should be specifically requested) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Request and Certifications under 35 U.S.C. 122 (MPEP 600). Applicant must attach form PTO-616/33 or its equivalent. 17. <input type="checkbox"/> Other
6. <input type="checkbox"/> Application Data Sheet, See 37 CFR 1.78	
18. <input checked="" type="checkbox"/> CONTINUING APPLICATION: Check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Amendment Data Sheet under 37 CFR 1.78. <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-Part (CIP) of prior application No.: 08/015401, filed March 15, 1998. Prior application information: Examiner D. Isabella Group Art Unit 3738 For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5a, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation should be called upon when a portion has been inadvertently omitted from the submitted application parts.	
19. <input checked="" type="checkbox"/> CORRESPONDENCE ADDRESS <input checked="" type="checkbox"/> Customer Number or Bar Code Label: 080527777 or <input type="checkbox"/> Correspondence Address below Name: Philip S. Johnson, Esq. Address: Johnson & Johnson One Johnson & Johnson Plaza New Brunswick, NJ 08833-7003 USA	
20. TELEPHONE CONTACT Please direct all telephone calls or telefaxes to E. Richard Skala at: Telephone: (732) 524-2718 Fax: (732) 524-2805	
21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED	
NAME	E. Richard Skala Reg. No. 31061
SIGNATURE	
DATE	October 29, 2001

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